

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
476798
APPLICANT(S)

FILING DATE
6/7/95

CLAIMS							
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1				1		51
2		1					52
3	1						53
4	<i>Canceled</i>						54
5	1						55
6		1					56
7		1					57
8	1						58
9		1					59
10		1					60
11		1					61
12		1					62
13		1					63
14		1					64
15		1					65
16		1					66
17		1					67
18		1					68
19		1					69
20		1					70
21							71
22							72
23							73
24							74
25							75
26							76
27							77
28							78
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34							84
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36							86
37							87
38							88
39							89
40							90
41							91
42							92
43							93
44							94
45							95
46							96
47							97
48							98
49							99
50							100
TOTAL IND.							TOTAL IND. 2
TOTAL DEP.							TOTAL DEP. 17
TOTAL CLAIMS							TOTAL CLAIMS 19